## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10617185

 		CLAIMS A	(Column		(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			23					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		. :	BASIC FEE	375.00	ОŖ	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			Q3 minus 20=		* 3		, ,	X\$ 9=		OR	X\$18=	54
ÎND	EPENDENT CL	AIMS	2 minus 3 =		* Ø			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P					+140=		OR	+280=		
* lf	the difference	in column 1 is	ro, ente	r "0" in c	olumn 2		TOTAL	,	OR	TOTAL	204	
	C		MENDED	DED - PART II				4			OTHER THAN	
		(Column 1) CLAIMS	10 To	(Colui		(Column 3)	1	SMALL	sag to a	OR'	SWALL	
AMENDMENT A		REMAINING AFTER AMENDMENT	IING R PF		BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	ALTATION OF M	Minus	***	T OL AINA	=		X42=		OR	X84=	
بنب	FIRST PRESE	NTATION OF M	OLTIPLE DEF	ENDEN	I CLAIM		]	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT FEE	
	(Column 1) (Column 2) (Column 3)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAÌD		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATÊ	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CL AIM	=		X42=		OR	X84=	*
	Transa i neoc	INTALION OF IN		CIVDEIV	T OLATIVI			+140=		OR	+280=	
- 3							, l	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	er er
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF M	Minus	***	T CLAIM	=		X42=		OR	X84=	
<b> </b>	Transi PRESE	NIATONOF	OLITE DE	LINDEIN	CLANVI		L	+140=	į	OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the entry in column 1 is less than 1 to less than 2 to less than 3 to less tha										OR	TOTAL ADDIT FEE	
**		ımber Previously I nber Previously P							propriate bo	x in co		